PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

021269-010

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN	
	OTAL CLAIMS	s				olumn 2)		TYPE		OR	SMALL	ENTITY
			16					RATE	FEE	.	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/6 minus 20= * /		T)		X\$ 9=		OR	X\$18=	
Z	DEPENDENT (CLAIMS	2 minus 3 = 1 0				·	X43=		OR	X86=	<u> </u>
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT	ESENT				+145=		OR	+290=	
*	f the differenc	e in column 1 is	less than z	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	471
CLAIMS AS AMENDED - PART II											OTHER	THAN
	,	(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL			TOTAL	
		(Column 1)		(Column	2)	(Column 3)	Α	DDIT. FEE	<u> </u>	_	ADDIT. FEE	_
AMENDMENT B		CLAIMS REMAINING		HIGHES	T I		lr		ADDI-	7 [ADDI-
		AFTER AMENDMENT		PREVIOUS PAID FO	SLY	PRESENT EXTRA		RATE	TIONAL FEE	.	RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	
	Independent		Minus	***		= .	-	X43=		1 1	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT CL	LAIM		-			OR	7,00-	
•	•			•				+145=.		ÓR	+290=	
							. A[TOTAL DDIT FEE		OR ,	TOTAL ODIT, FEE	
		(Column 1)		(Column	2) ((Column 3)						
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	-	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X-10-		OR		
* If	* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.									OR	+290=	• .
11	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
Ť	he 'Highest Num	ber Previously Paid	For (Total or	Independent)	ss than is the h	o, enter "3." ighest number		DIT. FEE L	ropriate box			